

**Construction Notice**

This contact list may not be complete. If you cannot find the contact you are looking for, please close this page and E-mail the web master. You may also contact Provider Relations at the number on this document.

August 2002

Commercial Transportation Key Contacts**Hours are 8:00 a.m. to 5:00 p.m. (Mountain Time) Monday - Friday**

Topic	Contact	Information Available
Claims (Medicaid)	Claims Processing Unit P. O. Box 8000 Helena, MT 59604 Phone: (800) 624-3958 In state (406) 442-1837 Out of state and Helena	<ul style="list-style-type: none">• Send paper claims to this address.• Call for answers to claims questions.
Client Eligibility		<ul style="list-style-type: none">• See <i>Client Eligibility</i> in the <i>Key Contacts</i> listing.
PASSPORT Client HelpLine	PASSPORT to Health P.O. Box 254 Helena, MT 59624-0254 Phone: (800) 362-8312 In and out of state	<ul style="list-style-type: none">• Clients who have general Medicaid questions may call the Client HelpLine.
PASSPORT Provider HelpLine	PASSPORT to Health P.O. Box 254 Helena, MT 59624-0254 Phone: (800) 480-6823 In and out of state	<ul style="list-style-type: none">• For answers to any PASSPORT related questions.• To enroll as a PASSPORT provider.
Policy Questions	Denise King Medicaid Services Bureau P.O. Box 202951 1400 Broadway Helena, MT 59620-2951 Phone: (406) 444-4189 In and out of state Fax: (406) 444-1861 In and out of state E-Mail: dking@state.mt.us	<ul style="list-style-type: none">• See also <i>Policy Questions</i> in <i>Key Contacts</i> listing.
Prior Authorization	Mountain-Pacific Quality Health Foundation Medicaid Transportation P.O. Box 6488 Helena, MT 59604 Phone: (800) 292-7114 Fax: (800) 291-7791 E-Mail: ambulance@mpqhf.org	<ul style="list-style-type: none">• Prior authorization required for scheduled ambulance transport.• Authorization for emergency ambulance transport services must be obtained within 30 days following the service.

Commercial Transportation Key Contacts (continued)

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Topic	Contact	Information Available
Provider Enrollment	Provider Enrollment Unit P.O. Box 4936 Helena, MT 59604 Phone: (800) 624-3958 In state (406) 442-1837 Out of state and Helena	<ul style="list-style-type: none"> To enroll as a Montana Medicaid Provider.
Provider Relations	Provider Relations Unit P.O. Box 4936 Helena, MT 59604 Phone: (800) 624-3958 In state (406) 442-1837 Out of state and Helena	<ul style="list-style-type: none"> For questions about claims, EDI, eligibility, payments, denials, or to request billing instructions, manuals, or fee schedules, call or write. Billing instructions, manuals, forms, and fee schedules are also available on the Provider Information Web Site at www.dphhs.state.mt.us/hpsd/
Restricted Client Authorization	Surveillance/Utilization Review Section P.O. Box 202953 Helena, MT 59620 Phone: (406) 444-4167 In and out of state	<ul style="list-style-type: none"> For authorization for emergency services provided for restricted clients, contact the Surveillance/Utilization Review Section (SURS). All other services must be authorized by the client's designated provider. See <i>Authorization, Prior and Restricted</i> in the <i>Key Contacts</i> listing for other authorization information.
Third Party Liability	Third Party Liability Unit P. O. Box 5838 Helena, MT 59604 Phone: (800) 624-3958 In state (406) 442-1837 Out of state and Helena	<ul style="list-style-type: none"> For answers to questions about private insurance, Medicare or other third-party liability.